



#5 / Amendment
B (Informed)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Han-Chung Tseng

Serial No: 09/921,573

Group Art Unit: 3724

Filing Date: 08/06/2001

Examiner: PRONE, JASON D

For: ARTISTIC KNIFE WITH SPARE BLADES

Honorable Commissioner for Patents

Washington, D.C. 20231

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TECHNOLOGY CENTER R3700

Sir,

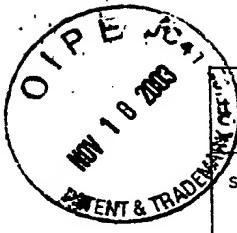
Responsive to the Office Action mailed on September 16, 2003,
please amend the above-identified application as follows:

AMENDMENTS TO THE CLAIMS are reflected in the listing of
Claims, which begins on page 2 of this paper.

REMARKS begin on page 5 of this paper.

TWO APPENDIXES are attached on pages 8 and 9 of this paper.

3724



AMENDMENT TRANSMITTAL LETTER				ATTORNEY'S DOCKET NO.
SERIAL NO. 09/921,573	FILING DATE 08/06/2001	EXAMINER PRONE, JASON D	GROUP ART UNIT 3724	
INVENTION ARTISTIC KNIFE WITH SPARE BLADES				

TO THE COMMISSIONER OF PATENTS AND TRADEMARKS:

Transmitted herewith is an amendment in the above-identified application.

Small entity status of this application under 37 CFR 1.27 has been established by a verified statement previously submitted.

A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

No additional fee is required.

The fee had been calculated as shown below:

(1)	(2)	(3)	SMALL ENTITY	OTHER THAN A SMALL ENTITY
CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE X \$ 6 = \$	RATE X \$ 12 = \$
TOTAL	MINUS	=	X \$ 18 = \$	X \$ 36 = \$
INDEP	MINUS	=	+ \$ 60 = \$	+ \$120 = \$
FIRST PRESENTATION OF MULTIPLE DEP CLAIM			TOTAL ADDT. FEE	OR TOTAL

- .. If the entry in Col 1 is less than the entry in Col 2 write "0" in Col 3
 - .. If the "Highest No Previously Paid For" IN THIS SPACE is less than 20, enter "20"
 - .. If the "Highest No Previously Paid For" IN THIS SPACE is less than 3, enter "3"
- The "Highest No Previously Paid For" (Total or Indep) is the highest number found in the appropriate box in Col 1

Please charge my Deposit Account No. _____ in the amount of \$ _____.
A duplicate copy of this sheet is enclosed.

A check in the amount of \$ _____ to cover the filing fee is enclosed.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. _____. A Duplicate copy of this sheet is enclosed.

Any additional filing fees required under 37 CFR 1.16.
Any patent application processing fees under 37 CFR 1.17.

November 4, 2003
(date)

(signature)

Patent and Trademark Office, U.S. DEPARTMENT of COMMERCE